



## **Texas Board of Occupational Therapy Examiners**

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To be used by:  
**Applicants for a license who have passed the examination more  
than one year ago  
and do not hold a current state license**

Make as many copies of this form as you need

- Complete one copy of this form for each employer for whom you have worked in Occupational therapy for two years preceding application.
- Each form must be signed by the employer and sent to the board by that employer.

**Part 1. To be completed by the applicant.** First, give the name and address of your employer - the company that wrote your paycheck. If the address of the company is different from the address of the facility(ies) where you worked, list the facility and location in the space below. Add as many pages as you need. If you were self-employed, copies of your tax return with this information (not the entire return) will suffice.

*Name of Applicant:* \_\_\_\_\_

*Dates of Employment: (from) \_\_\_\_\_ (to) \_\_\_\_\_*

*Position:* \_\_\_\_\_

*Company:* \_\_\_\_\_

*Street, P.O. Box, etc.* \_\_\_\_\_

*Area Code and Phone:* \_\_\_\_\_

*Facility Name (if different than above):* \_\_\_\_\_

*City and State:* \_\_\_\_\_

### **Part 2. To be completed by employer or supervisor (present or former):**

*I certify that the above-named individual was employed as noted during the dates specified with the title specified.*

\_\_\_\_\_  
*Signature of Employer or Representative*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Printed Name and Title*

\_\_\_\_\_  
*Area Code and Phone*